IN THE UNITED STATES BANKRUPTCY COURT
FOR THE DISTRICT OF PUERTO RICO
OLD SAN JUAN DIVISION

IN RE: GLORIA ESTHER QUINONES ZAYAS)
) Chapter 13
) Bankruptcy Case No: 10-09025

Debtor(s)

CERTIFICATE OF SERVICE

I, Donna Avila, do hereby certify that on 03/02/2012, I served copies of Notice of Payment Change Letter to the following participants by the United States Postal Service, postage prepaid, and by CM/ECF as indicated:

By U. S. Mail, Postage Pre-paid

By CM/ECF

Debtor:
GLORIA E. QUINONES ZAYAS
URB COLINA DEL ESTE
CALLE ZEUS BUZON 1082
JUNCOS, PR 00777

Debtor's Attorney:
ROBERTO FIGUEROA CARRASQUILLO

Trustee:
ALEJANDRO OLIVERAS RIVERA

03/02/2012
Date

/s/ Donna Avila
Bankruptcy Processor
314-457-5390
United States Department of Agriculture
Centralized Servicing Center
P.O. Box 66879
St. Louis, MO 63166

UNITED STATES OF AMERICA
United States Department of Agriculture
Rural Housing Service

Payment Change Calculation

Case # 10-09025

Debtor(s) GLORIA ESTHER QUINONES ZAYAS

Claim # 5 **(if known)**

Account # 9 0 9 1

	CURRENT PAYMENT		Effective Date 04/08/2012
		Due to :	Subsidy
Principal & Interest	$541.58		$541.58
Less subsidy	-$255.76		$0.00
Total P&I Payment	$285.82		$541.58
Escrow	$14.50		$14.50
Escrow shortage	$2.41		$2.41
Total Escrow	16.91		16.91
Fees			
Total Payment	302.73		558.49

Completed By: DONNA AVILA

Date: 03/02/2012

B 10S1 (Supplement 1) (12/11)

UNITED STATES BANKRUPTCY COURT

District of Puerto Rico

In re GLORIA ESTHER QUINONES ZAYAS,
Debtor

Case No. 10-09025

Chapter 13

Notice of Mortgage Payment Change

If you file a claim secured by a security interest in the debtor's principal residence provided for under the debtor's plan pursuant to § 1322(b)(5), you must use this form to give notice of any changes in the installment payment amount. File this form as a supplement to your proof of claim at least 21 days before the new payment amount is due. See Bankruptcy Rule 3002.1.

Name of creditor: USDA - Rural Housing Service
Centralized Servicing Center

Court claim no. (if known): 5

Last four digits of any number you use to identify the debtor's account: 9 0 9 1

Date of payment change: 04/08/2012
Must be at least 21 days after date of this notice (mm/dd/yyyy)

New total payment: $ 558.49
Principal, interest, and escrow, if any

Part 1: Escrow Account Payment Adjustment

Will there be a change in the debtor's escrow account payment?

☑ No
☐ Yes Attach a copy of the escrow account statement prepared in a form consistent with applicable nonbankruptcy law. Describe the basis for the change. If a statement is not attached, explain why: ____________

Current escrow payment: $ ____________ **New escrow payment:** $ ____________

Part 2: Mortgage Payment Adjustment

Will the debtor's principal and interest payment change based on an adjustment to the interest rate in the debtor's variable-rate note?

☑ No
☐ Yes Attach a copy of the rate change notice prepared in a form consistent with applicable nonbankruptcy law. If a notice is not attached, explain why: ____________

Current interest rate: ____________% **New interest rate:** ____________%

Current principal and interest payment: $ ____________ **New principal and interest payment:** $ ____________

Part 3: Other Payment Change

Will there be a change in the debtor's mortgage payment for a reason not listed above?

☐ No
☑ Yes Attach a copy of any documents describing the basis for the change, such as a repayment plan or loan modification agreement. (*Court approval may be required before the payment change can take effect.*)

Reason for change: DEBTOR HAS NOT RETURNED PAYMENT ASSISTANCE RENEWAL PACKET.

Current mortgage payment: $ 302.73 **New mortgage payment:** $ 558.49

Part 4: Sign Here

The person completing this Notice must sign it. Sign and print your name and your title, if any, and state your address and telephone number if different from the notice address listed on the proof of claim to which this Supplement applies.

Check the appropriate box.

☑ I am the creditor. ☐ I am the creditor's authorized agent. (Attach copy of power of attorney, if any.)

I declare under penalty of perjury that the information provided in this Notice is true and correct to the best of my knowledge, information, and reasonable belief.

✗ /s/ DONNA AVILA
Signature

Date 03/02/2012
mm/dd/yyyy

Print: DONNA AVILA
First Name Middle Name Last Name

Title BANKRUPTCY SPECIALIST

Company USDA - Rural Housing Service
Centralized Servicing Center

Address PO Box 66879
Number Street

St. Louis, MO 63166
City State ZIP Code

Contact phone (800) 349-5097 ext 3722

Email DONNA.AVILA@STL.USDA.GOV